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PURPOSE

The CalWORKs Stage One Child Care Program provides subsidized child care assistance for Welfare-To-Work (WTW) participants. Cal Learn teen parents are exempt from WTW activities and are provided child care according to the program to which they are assigned or in accepting or attaining employment.
Sufficient guidelines are provided to assist staff in applying the regulations using the regional market rate ceilings to determine certain maximum payments in Stage One Child Care.

STAFF RESPONSIBILITIES

The Employment Services Worker (ESW)/Welfare-To-Work (WTW) Case Manager is responsible for determining the number of days and hours of child care needed to participate in a WTW activity, and for providing the child care provider with the applicable regional market rate ceiling in the rate category fitting the family's need.
The ESW/WTW Case Manager is responsible for providing the child care consultant with the Demand Letter Special Rental Market or the Hard to Fill Child care needs, and assist in locating child care providers who are able to meet the child care needs of the family's need. The WTW CM will be the point person for resolution of any discrepancy or operator application for this client.
The ESW/WTW Case Manager assists and provides to understanding the child care needs of the family, and provides the child care consultant with information and other inputs necessary for continuous operation in a timely manner. The ESW/WTW will ever explore what have to and the possibilities for commuting travel.

DEFINITIONS

Certified market rate means the number of days and hours of care approved and certified by the regional market rate (RMR) ceiling for a specific child care provider.
Regional market rate
Regional market rate ceiling means the regional market rate (RMR) ceiling plus any applicable adjustments.
Maximum allowable ceilings (MAR) means the maximum amount that providers in different regions of California may be reimbursed for the same type of child care by the same age cohort in accordance with mandatory ceilings currently in effect.

SUBSIDIZABLE CHILD CARE HOURS

Reimbursements for child care can only be made when the Child Care Plan (FSA1-45-18) indicates the participant is scheduled to participate in a WTW activity.
Child care hours are subsidized only when the participant is actually in a WTW or Cal Learn activity. The ESW/Cal Learn Case Manager is the only person **and** the only **point** to be under specific of analysis. The child care plan and subsequent CCR/UR reports are to be based on the WTW Plan.
Reimbursing payments are limited to no more than **50 days** and no more than **50 hours** per week per child, per provider, per family, per month. Child care provider R&R is policy: 562-1/0540 Care Furniture / Stage Ahead.
Child care hours are not subsidized when the participant is not actually the parent is serving or attendance/RR activities, is reporting they are/currently of the Cal Learn program, participating in a WTW activity, or is in a WTW sanction status. Child care hours are absent from care for 3 consecutive days or more than 4 days total in a two week period. Child care hours are not subsidized when the participant is not actually in the child care. Longer needed, Provider will only be paid until the end of that billing period and no longer. Child care hours are not subsidized when the participant is not actually in the child care, and when the same documentation apply to unsubsidized families.
Child care hours are not subsidized when the participant is not actually in the CalWORks activity and is terminated by the provider. All the who that care was provider. The payment should be evaluated as an overpayment to this claim.
Child care hours are not subsidized when the participant is not actually in environments for absences before regular provider and the terminal return.
• The Stage Ahead Child Care Program is not available for child rearing hours after 6 pm.
• The Stay where the child, enrolled in an educational program, is receiving instruction from the parent who is not a credential teacher.
• Per regular hours of operation of a public school available for the child who is receiving instruction from the parent who is not a credential teacher.

OTHER REIMBURSABLE ITEMS

Other fees charged by the provider such as registration, expenses and insurance can be reimbursed either in a single payment or prorated over a 12 month period, as long as the provider documents that the same contractual terms used for running unsubsidized children are also applied to the subsidized children.
There is no limit to fees other than normal fees paid, provided the fees, plus the provider's rate, do not exceed the applicable maximum allowable ceiling. Refer to Regional Market Rate Development FSA1-45-12C to determine if the fee is allowable within the RMR ceiling amount.
Registration fees charged by a provider for both their regular session and summer sessions are allowable, provided the fees are consistent with the provider's usual charges (providers are not allowable).
Fees charged by a provider for a child's CCR/UR to accounting assistance (and not final the payment).
Fees charged by a provider other than one are allowable, the payment provider are in the contractual and informed that the fee is not allowable. Rebate the same on the child care provider. The payment should be evaluated as an overpayment for paying the fee. The administrator is to Bud in the case Rebate.

NON-REIMBURSABLE ITEMS

Reimbursable hours are not include:
• Hours spent participating in a public education program available to school age children; or
• Hours spent in school, or hours the child is enrolled and attending, including kindergarten, with an extended day program; or
• Hours spent in a child care program exempt under the provisions of nonsurcharge absences outlined in the Overbounce Absence section; or
• Days on which the provider is not open to provide services except for paid absence days.
Rebate reversals are not allowed for child care services that are exempt from Overbound if the child care case contains credible information that the provider has been convicted of a felony or misdemeanor involving child abuse, sexual abuse, and/or child neglect/endangerment.

REIMBURSABLE ABSENCES

Provider paid-absence reimbursements, except for drop-in day/nighttime care, unscheduled hours, or child care provided for an week, for a child is specified by the whole or the in paid provider day of non-operation, must establish this is the same agreement they have with the parents of the child. Refer to Regional Market Rate Development Fiscal Services Bulletin 2-0-0 for further.
Allowable absence reasons include:
Repair provider
• Time the provider is due to illness
• Time the provider has a paid day of non-operation - limited up to ten (10) days per fiscal year per provider.
Family Child Care Home
• Hours the provider is not open to the regular provider - limited up to ten (10) days per fiscal year, unless the parent provides a doctor's statement certifying need beyond 10 days.
• Time the provider has a paid day of non-operation - limited up to a maximum of ten (10) days per fiscal year.

REGIONAL MARKET RATES

Rate ceilings for Stage One Child Care are based on the Regional Market Rates (RMR) listings issued by the California Department of Education. Providers are to be reimbursed at the lesser of the RMR ceiling or the provider's rate. Note:
• The RMR ceilings represent the maximum that can be paid.
• Limitations are placed on the uses of hourly and daily rates and define the use of the hourly rate.
• Licensed providers who establish a rate will be reimbursed for that rate, plus any applicable adjustments (maximum payment).
• Unlicensed providers who establish a rate will be reimbursed for that rate, plus any applicable adjustments (maximum payment).
• Rate ceilings are based on the lesser of the provider's rate or a provider whose established rate exceeds the regional market rate.

APPLICATION OF RMR CEILINGS

The ESW/RMR will use the age of the child, the certified need for child care and the facility type to identify the applicable RMR ceiling. Refer to Regional Market Rate Ceilings Fiscal Bulletin 2-0-0.
Center Care
• Licensed Child Care Centers
• Public or private schools operating extended day programs
• Licensed Family Child Care Homes
• Recreation programs, exempt from licensure and meet all the following requirements:
Provide a minimum of four sheets
Provide adult supervision for children during all hours of operation
California Department Health Care has been completed on all employees who have contact with children.
Family Child Care Home Aide
• Licensed family home
• Licensed Family Child Care Home, a home setting operated on tribal or federal land
Authorized Exempt Aide
• Unlicensed, exempt by all other providers. If no ceiling is provided for the applicable rate category, a rate is to be determined by multiplying the RMR ceiling for the applicable rate category by 1.5.
For children who are less than 2 years of age and enrolled in kindergarten, apply the following categories:
1. Use the 2-5 Yrs. category when the child is in a program/classroom that is licensed as a center program.
2. Use the 6+ Yrs. category when the child is in a program/classroom that is licensed as a school age program.

RATE CATEGORIES

Providers are to be reimbursed at a rate higher than the rate charged to all unsubsidized family and in excess of the applicable RMR ceiling.
Rate ceilings are based on the lesser of the provider's rate or the applicable rate category and the RMR ceiling for each category. Rate ceilings are based on the lesser of the provider's rate or the RMR ceiling for each category. Rate ceilings are based on the lesser of the provider's rate or the RMR ceiling for each category. Care for school-age children (from Kindergarten such as a day care center (ages 5-9) and to 9:00 pm.
• Care for school-age children in centers or homes that meet comparability to the certified need of the family.
Hourly Rate
• Periods of care are less than 30 hours per week and less than 6 hours on any day.
• An unsubsidized but documented need of less than 6 hours per occurrence that exceeds the certified need for care (overtime, work-related training, or other activities).
• That portion of the certified need for child care that exceeds 30 3 hours per week and is not included in the provider's full time weekly or full time daily rate (for example, a parent needs care for a child for 35 hours or more than one occasion to meet the entire need for child care
Daily Rate
• A certified need for child care of 6 hours or more per day; or
• A certified need for child care of less than 6 hours per occurrence such as the parent's need to work on a regularly scheduled day off, that exceeds the certified need for care
• Daily rate reimbursements must be documented with verification such as work schedule.
Full-time Monthly Rate
• A certified need for care is less than 30 hours per week
Full-time Daily Rate
• A certified need for care is 30 hours or more per week
Part-time Monthly Rate
• A certified need for care is less than 30 hours per week and that need occurs in every week of the month; or
• A certified need for care averages less than 30 hours per week when calculated by dividing the total number of hours of need in the month by 4.33 averaging 30 hours per week and the need for care occurs in every week of the month.
Full-time Hourly Rate
• A certified need for care of 30 hours or more per week and the need occurs in every week of the month; or
• A certified need for care averages 30 hours or more per week when calculated by dividing the total number of hours of need in the month by 4.33 averaging 30 hours per week and the need for care occurs in every week of the month.
Example 1:
A parent who is a student needs care from 7:30 to 8:30 am and 2:30 to 5:00 pm (3.5 hours) for a child in school age care from 7:00 to 8:00 am and 2:30 to 5:00 pm (3.5 hours) for a child in school age care, Monday through Friday.
Example 2:
A parent who is a student needs care for a family who has a parent work schedule on a flexible or alternate work schedule, and the parent's need for care averages 30 hours per week and the need for care occurs in every week of the month.

EVENING AND WEEKEND ADJUSTMENT RATES

Evening and/or weekend rate adjustments apply only to **licensed** providers and do not apply to unlicensed providers. Evening and/or weekend rate adjustments are made when certified need for child care that includes more than 25% of the certified need for child care occurs during the evening and/or weekend hours. Apply the applicable adjustment to the RMR ceiling rate for the applicable category multiplied by:
• 1.25 when 25% or more of the time 50% of the certified need for child care occurs during the evening
• 1.35 when 50% or more of the certified need for child care occurs during the weekend.
The rate adjustment is applied to the total hours of care, not just the evening and weekend hours.
Note: If the evening care is less than 10%, there is no premium time, even if after 6:00 pm or weekend hours.
Reimbursement to the provider is the maximum amount calculated above or the amount charged to unsubsidized families for the same hours, whichever is less.

ADJUSTMENT RATE FOR CHILDREN WITH EXCEPTIONAL NEEDS

When child care services are provided to a child with exceptional needs, the lesser of the provider's rate or the RMR ceiling, whichever is lower, is to be multiplied by one of the following:
• 2.0 for children with exceptional needs who have an active individualized education program (IEP) or an Individual Family Service Plan (IFSP).
• 2.5 for children who are severely disabled who require intensive training in a specialized environment. Severely disabled children are those with severe hearing deafness, deafness, severe orthopedic impairments, serious emotional disturbance, severe mental retardation, or severe multiple disabilities, or individuals who have been eligible for enrollment in a development center for handicapped pupils.
• 3.0 for children who are severely disabled who require intensive training in a specialized environment. Severely disabled children are those with severe hearing deafness, deafness, severe orthopedic impairments, serious emotional disturbance, severe mental retardation, or severe multiple disabilities, or individuals who have been eligible for enrollment in a development center for handicapped pupils.
Children who are suffering a severe illness, such as cancer, may need additional services. Refer the provider, if the child appears to be eligible, to Cal Learn and WTW Case Management for assistance in locating and providing the additional child care services and/or accommodations for that particular child are being provided and they are being paid for. Refer the provider to the Regional Market Rate Ceilings for the listing of a special rate, or relevant capacity that is to be based rate for care.

PROVIDER RATE DOCUMENTATION

Staff may use the provider's published rates and terms available to the general public as acceptable documentation of the providers established rates and terms for Stage One Child Care.

LIMITATIONS ON REIMBURSEMENT RATES

Providers will only be reimbursed using a single rate. Stepson, controller can be reimbursed using both a daily and hourly rate when all of the following conditions are met:
• Two single rate established by the provider corresponds to the family's need.
• The provider has established a rate in both daily and hourly categories.
• Using both rates is consistent with what the provider charges unsubsidized families, including a child's need for care.
Hourly and daily rates are not to be used to exceed the RMR ceiling. The daily ceiling(s) is above those are only two providers or more is a region that meet the needs of the child care. Hourly rate ceilings are based on the lesser of the provider's rate or the Hourly rate ceiling. Providers can be reimbursed for child care when the first provider's hours of care are less than 30 hours per week, and the second provider's hours of care are at least **and** the parent choose a licensed center for the specific purpose of providing care for the child while the parent is attending school. Reimbursement is limited to one rate for the same portion of the child's certified need, unless a benefit exists with the conditions and limitations stated below.

CHANGES IN PROVIDER RATES AND NOTIFICATION

When the parent changes providers **without prior** notification to the action administrator, the new provider will be paid at the lesser of the following:
• The change must be due to an emergency or exceptional situation such as the current provider is no longer able to care for the child, or the parent is ill.
• The new provider must meet regulatory criteria.
• The new provider's rate must be the lesser of the RMR/CDA Stage One Child care Informing Below and Prepaid Fund (CCIP)
In the above situations, the new provider will be approved effective the date the child care provider ceased to care for the child. The administrator is to notify the parent of the prior authorized provider and ask the parent the transition has occurred.
Voluntary Changes in Child Care Providers
If the change was **not** due to an emergency or exceptional situation, the new provider's rate will be paid at the lesser of the provider's rate or the RMR ceiling, effective the 30-day retroactive period. If applicable, to avoid duplicate payments. The parent is responsible for the payment of the child care for the 30 days.
If the prior authorized provider's informal terms do not require full payment, or a provider's rate is less than the RMR ceiling, the provider's rate is to be paid for the full month and the end of the billing cycle to approve the new provider.

FAMILY CO-PAYMENTS

A parent may choose a provider who charges a fee for the applicable RMR ceiling. The difference between a provider's rate and the applicable RMR ceiling when the provider charges a fee is the parent's co-payment. The parent is not required to make payments to the provider for this co-payment. The co-payment cannot be offset against a child's grant.

FAMILY FEE

The family fee is the amount the parent is required to pay towards his/her own child care costs based on the fee established by the state. All families, including categorically needy, are to be charged a family fee for child care.
Pursuant to the California Department of Education's Education Code, the family fee will be based on the family's income and family size. The family fee will be based on the Schedule Monthly Fees FSA1-45-18 C.
Upon receipt of the family's income and family size, a review of certain must be sent. The worker will need to be assess the family fee and send a notice of action as appropriate. Families who are categorically needy are not charged a family fee. In case child care plan will be completed and additional offices are in need of child care.

INCOME DETERMINATION FOR FAMILY FEE

The family's income will be used to calculate the family fee. The income figure may be either monthly or annual depending on the following:
Monthly income (include all income sources)
• Earnings of a child under 18 years
• Cash aid, including Aid to Families with Dependent Boot care for Caring expenses
• Grants or loans for educational purposes made or insured by a state or federal agency
• Value of food stamps or other aid in-kind consisting food and shelter
• Business expenses for self-employed family members
• Income from Supplemental Security Income (SSI) Program Exclusion
adjusted monthly income is the total countable income **minus** child support payments made to a non-household member, medical expenses, and child care costs not allowable by any other adjustment or monthly deductions.
Annual income (include all income sources) Wages, salaries, overtime, and tips, earnings on migrant and seasonal employment. When regular Donuations occur, the average of the average over a 12 month period.
Example 1:
Parent is paid weekly and regularly receives overtime pay. Demand two checks for $280 and $300 for the last 4 weeks. The average is $290 (rounded down) as follows:
Calculation
$280 + $300 = 580 / 2 = $290.00 (weekly income)
$290.00 x 52 weeks = (yearly income)
$15,080.00 (yearly income) (rounded income)
The monthly amount is used to compute the family fee.
Example 2:
Parent is paid weekly but has received periodic commissions during the last four months as follows:
Calculation
Average the commissions over a 12 month period and add to the weekly income amount.

FAMILY SIZE

The family size is determined by the number of adults and children residing under marriage or adoption that comprise the household in which the child receiving child care services is living.
Adults are considered (including needy relatives), who are not the parent of the child receiving child care services (i.e., unrelated adults, aunts, uncles) or are not the parent of the child receiving child care services (i.e., unrelated adults, aunts, uncles) or are not the parent of the child receiving child care services.

CALWIN REQUIRED GUIDE FOR CHILD CARE PLANS

The ESW/RMR/AB3 is to follow the CalWIN Child Care Plans ACI to establish the Family Fee.

CALWIN REQUIRED FORM FOR SUPPORTIVE SERVICES PAYMENT AUTHORIZATION

The ESW/RMR/AB3 is to follow the CalWIN Supportive Services Payment Authorization ACI to issue the Family Fee authorized.

REIMBURSEMENT CLAIMS

The CCR/UR, CalWORKs Child Care Reimbursement Report, is to be used for participation child care payments and to report changes affecting family income or child care.
Reports and providers are to complete and sign the CCR/UR report and submit to the ESW/Cal Learn Case Manager. The ESW/Cal Learn Case Manager is responsible for the CCR/UR is to:
• Review and approve of the CCR/UR, on a monthly basis.
• Send CalWIN Notice 1799 - Notice of Insufficient CCR/UR to the client and provider if the CCR/UR is incomplete.
• Send the CCR/UR to the Accounting Office accurately within 20 calendar days after receipt of the completed CCR/UR report.
Accounting Office is responsible for issuing the check. Partial months or potential month are not calculated using the formula in issue (payment/months) in CalWIN.
Weekly Rate
• 2 days - 2 weeks
• 3 days - 3 weeks
• 4 days - 4 weeks
Communicating a reported drop in hours to the WTW Case Manager on the CalWORks Communication Document FSA1-45-18.

ADVANCE PAYMENTS

Rental payments are normally made in arrears and on a monthly basis. Payments can be made in advance if the provider and the parent agree to the terms. The parent is to sustain the disadvantages of advance payment such as forwarding the potential for overpayments to the parent and attempt to persuade the provider to accept payment in arrears.
Advance payments are to be made only with the provider to accept payment in arrears, the following steps are to be taken:
1. The Child Care Plan must be completed, filled out, signed by the parent, provider, and the administrator. Include the provider's name, address, and the amount of the advance in the portion of the plan entitled "Any other additional payments." Indicate the number of days or months for which the payment is made. Advance payments are contingent upon receipt of the completed CCR/UR on or after the 10th day of the month following the month for which the advance was made.
Example:
An advance payment was made for August, the CCR/UR must be returned by September 10th.
2. The ESW/Cal Learn and approve the FSA1-45-18B Child Care Plan. The ESW will search the Regional Market Rate Ceiling for the applicable rate category and the lesser of the in 30-45 County day Summit before returning to the starter. If no record exists, the ESW is to contact the Child Care Program Research Document Prestigate and Report to the Program Lead Coordinator at
Contact@childcare.cpp@dpss.lacounty.gov

2. The ESW/RMR/AB3 authorizes the payment.
The ESW/RMR/AB3 is to issue the payment within 21 calendar days after approval of the advance has been made.
Provider is to return the advance payment in that amount of an emergency payment, received and not subsequently supplanted by proof of costs. When an advance payment is made, the ESW is to notify of case, refer to CalWIN Policy, Grid Issued Advance Payments.

CALWIN REQUIRED GUIDE FOR SUPPORTIVE SERVICES PAYMENT AUTHORIZATION

The ESW/RMR/AB3 is to follow the CalWIN Supportive Services Payment Authorization ACI for any child care payments.

REQUIRED NOTIFICATIONS

CalWIN/RMR parents are to be notified with a CalWIN notice No 6370 or No 6371 when authorizations are created, changed or discontinued.
Providers are to be informed with written notice (1710.5) (Accounts) correspondence when the child care authorization is created, changed or discontinued.
Note: Negative notifications must **not** contain the case hearing information on the back of the notice.
If this action occurs during a billing cycle and the terms of the child care plan causes full payment to be made, the provider is to be informed of the change in the child care authorization. The provider is to be informed when a change in the child care authorization affects the payment amount.
Negative notices and changes are meeting.

AID PAID PENDING HEARING

When a parent requests a hearing within the period of timely notification (within 60 days of receipt of the notice of action) and continuation of benefits is requested, the administrator is to inform the parent that benefits will continue until a decision is made and that the parent may be liable for any aid paid pending if the hearing decision is adverse to the parent.
The hold takes the early within the hours of the action applicable Children Hot health and safety issues.

INFORMATION SHARING AGREEMENTS AND PROGRAMS

The ESW/RMR is to use the CalWORks Communication Document FSA1-45-18 to share information with the Employment Services Worker/Welfare-To-Work Case Manager, Cal Learn Case Manager, Child Care Consultant, Employment Services Worker (ESW), Child Care Resource Final Cleary Worker (MFT) and/or the Real Cal Worker.

PROBATIONARY STATUS IN CHILD CARE LICENSE

PID Program will notify Regional staff when a licensed child care provider's license has been placed on probation.
The ESW/RMR/AB3 is to contact within two business days, in writing, using the Notification of Child Care Provider Placed on Probation, FSA1-45-21C. Note that in case provider has been placed on probation and that they have the options these alternate child care providers with the current provider without assumption being terminated.

TEMPORARY SUSPENSION OR REVOCATION OF CHILD CARE LICENSE

PID Program will notify Regional staff when a licensed child care provider's license has been temporarily suspended or revoked.
The ESW/RMR/AB3 notifies the case within two business days, in writing, using the Notification of Suspended or Revoked Child care License, FSA1-45-17B. Staff then refer the case to the Employment Services Worker/Welfare-To-Work Case Manager.
The ESW/RMR and Services provide to the child care provider as of the Effective date of the suspension or revocation.
If the child care provider has any question they can contact Community Care Licensing Division (CCLD).
NOTE: The client should be advised by the Children's Home Society (CHS) Relocation Services Program or Child Care Resource Center to locating an alternate child care provider.

REFERENCES

DSS Manual Sections 47-20, 47-202, 47-203, 47-205, 47-206, 47-207, 47-700, A-25, 42-411, 42-712, 101, 108.215, 201, 206.1, 206.2, 206.3, 206.4, 206.5

ATTACHMENTS

1. FSA1-45-21C Child Care Plan
2. FSA1-45-18 Communication Document FSA1-45-18
3. FSA1-45-12C Registration Fee Worksheet
4. FSA1-45-18 Monthly Fees Chart
5. FSA1-45-18C Child Care Category Chart
6. FSA1-45-18T1C Regional Market Rates (RMR) Ceilings
7. FSA1-45-18 Communication Document FSA1-45-18
8. FSA1-45-21B Notification of Suspended or Revoked Child Care License
9. FSA1-45-21C Notification of Child Care Provider Placed on Probation

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